

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

PLAINTIFF <b>UNITED STATES OF AMERICA</b>	COURT CASE NUMBER <b>CR-05-10176-RCL</b>
DEFENDANT <b>BRANDON DELGADO</b>	TYPE OF PROCESS: Preliminary Order of Forfeiture

**SERVE  
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN.

\$5,000.00 in United States Currency

ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:

Number of process to be served  
with this Form - 285

Kristina E. Barclay, Assistant U.S. Attorney  
United States Attorney's Office  
John Joseph Moakley United States Courthouse  
1 Courthouse Way, Suite 9200  
Boston, MA 02210

Number of parties to be served  
in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please seize and maintain custody of the above-referenced Currency in accordance with the attached Preliminary Order of Forfeiture and applicable law.

CATS ID No. 05-ATF-001449

JLJ xt 3297

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

(617) 748-3100

DATE

November 20, 2006

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total  
number of process indicated.  
(Sign only first USM 285 if more than  
one USM 285 is submitted)

Total Process

No \_\_\_\_\_

District of Origin

No \_\_\_\_\_

District to Serve

No \_\_\_\_\_

Signature of Authorized USMS Deputy or Clerk

Date

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above)

☐ A person of suitable age and discretion then  
residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service

11/29/06

Time

3:30

am

pm

Signature of U.S. Marshal or Deputy

Service Fee

Total Mileage Charges  
(including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount Owed to US Marshal or

Amount or Refund

REMARKS:

Currency seized + deposited into Custom  
Suspense Account.

PRIOR EDITIONS MAY  
BE USED

1. CLERK OF THE COURT

FORM USM 285 (Rev. 12/15/80)

☐ USMS RECORD ☐ NOTICE OF SERVICE ☐ BILLING STATEMENT ☐ ACKNOWLEDGEMENT OF RECEIPT